Under	Ilie Paperwork Re	T ADDI ICA	LICINIT		ECORD	mation unless	Application	or Oocker Num	66		
CLAIMS AS FILED - PART. I							SMALL E	NTITY	OR.	OTHER THAN SMALL ENTITY	
(Column 1) (Column 2)							SMALL		ſ	RATE	FEE
FOR NUMBER FILED NUMBER EXTRA					-	RATE	FEE		- KANE	s	
BASIC FEE (37 CFR 1.16(a))						1		·	OR		
TOYAL CLAIMS (37 CFR 1.16(c)) 24 minus 20 = .				<u> </u>		ŀ	× 5=		OR	× 3	
INDEPE	INDEPENDENT CLAIMS 3 minus 3 = .					-	× 5=		OR	× 5	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(d))							+ 5=		OR	+ \$=	
* If the difference in column 1 is tess than zero, enter "O" in column 2. TOTAL									OR	TOTAL	
CLAIMS AS AMENDED - PART II											
راررا	olni	(Column 1)		(Column 2)			SMALL	NTITY	OR 1		ENTITY
100	POLSC	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total	AMENDMENT	Minus	PAID FOR	•		x \$=.		OR	x \$=	
	(27 CFR 1.16(c))	24	Minus	24	-		x \$ =		OR	x \$=	
	(17 CFR 1,16(0))	3		<u></u>	0.145(0)		•		OR	+5 *	
FIRST PRESENTATION OF MULTIPLE DEPENDENT QLAIM (37 CFR 1.16(4))							TOTAL	1	OR	TOTAL ADD'L FEE	/
5/23/05							ADO'L FEE	L	J ~	7000.00	
		(Column 1)	— т	(Column 2)	(Column 3)	1	<u> </u>	1	7	RATE	ADDI-
2		CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE			TIONAL FEE
曾	Total	20/	Minus	-24	=		x s=		OR	X \$=	
ENDMEN	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	. (8)	Minus	-3			x 1_=		OR	× 5	<u> </u>
₩ W	RRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1	+5=	<u> </u>	OR	15	
P	PRSI PRESENT					•	TOTAL ADO'L FEE		OR	ADO'L FEE	
		(Column 1)		(Column 2)	(Column 3)	_			-		
0		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	AMENDMENT	Minus	PAID FOR	=	1	x s=		OR	x s=	<u> </u>
AMENDMEN	(a) OFR 1.16(c))	·	Minus		=	1	x s=		OR	x s=	
Ý	(37 CFR 1,166))	1				1			OR	+ 5	
Ĭ ₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))					٤	TOTAL	1	OR	TOTAL ADO'L FEE	
	• If the entry in •	column 1 is less th	ian (he enl	ry in column 2, w	rite "0" in colum E is less than 2	n 3 0, e	ADD1, FEE anter "20".	· L	··· بـ		
	" If the Highest	MOLIDE LICATOR	L. Doid So	IN THIS SPAC	E is less than 3.	en	ler 3.			antumo 1	

e de

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USPTO the USPTO the USPTO. The will vary depending upon the individual case. Any comments including gathering, preparing, and submitting the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the emount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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